PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 09/849229											
CLAIMS AS FILED - PART I (Column 1) (Column 2)							TT I	ENTITY	OЯ	OTHER SMALL E	
FOR		NUMBE	R FILED .	NUMBER E	XTRA	RAT	Έ	FEE		RATE	FEE
BAS	SIC FEE							345.00	ОЯ		690.00
TO	ral claims	10				. XS	9=		OR	X\$18=	
IND	EPENDENT CL	AIMS . 3	minus :	3= :	<u> </u>	X31	}=		OR	X78=	
MUI	TIPLE DEPEN	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART III (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART III (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART III (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART III (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART III (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART III CLAIMS AS AMENDED - PA									
. 11	the difference	NUMBER FILED NUMBER EXTRA RATE FEE 345.00 OR \$345.00 OR \$345.0									
		•	•	•							THAN
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
NT A		REMAINING AFTER		NUMBER PREVIOUSLY		ŘA*	ΓE	TIONAL		RATE	TIONAL
amendment	Total	9		30		XS	8 <u>/</u>		OR	XS18=	
ME	Independent				-	ж3)»		OR	X78=	
لاً	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+13	0=		0	+260=	
			TOTAL OR TOTAL								
	H	ADUIT, PEE									
ENTB		CLAIMS PREMAINING AFTER		NUMBER PREVIOUSLY		RA	ΠE	TIONAL		RATE	TIONAL
Q.	Total	. 7	Minus	. 20	• /	X\$	9=		OR	X\$18=	. /
AMENDMENT	Independent	. 3		3		ХЗ	9=		OR	X78=	
ш	المتناب والمتناب والم						0=		OR	+260=	
	3/5/05				_		OYAL		OR	YOTAL	
14	2/51°			(0-1	·	ADDIT	FEE	-	Jon	ADDIT, FEE	
	and the same of	(Column 1)	2000	(Column 2) HIGHEST	(Column 3)			ADDI-	1	<u> </u>	ADDI-
AENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL
2	Total	. /	euniM	-20	- /	X3	9=		OR	X\$18=	
AMENDA	Independent	• /	Minus	- 3	• /	ХЗ	9e		OR	X78=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT CLAIM		-	Δ-	1	1	+260=	1
+130= 15 the entry in column 1 to less than the entry in column 2, write "0" in column 3.									OR		
"If the entry in column 1 is less than the entry in column 2, write "O' in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column 1.											

FORM PTO-171

Application or Docket Number